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Fill in this information to identify your case:						
Debtor 1	Dorian	L.	Harris			
Debtor 2	First Name	Middle Name	Last Name			
(Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Eastern District of Pennsylvania						
Case number	14 - 18499 ELF					
(If known)						

Check if this is:

☑ An amended filing

A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-f	iling spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	✓ Employed☐ Not employed	ed		☐ Employed ☐ Not employed		
	Include part-time, seasonal, or self-employed work.		Housing Serv	ice (Coordinator			
	Occupation may include student or homemaker, if it applies.	Occupation	riousing ociv	100	Socialitator	·		
		Employer's name	Philadelphia (Corp	o. for the Aging			
		Employer's address	642 No. Broad	d St	reet	Number Street		
			Philadelphia,		PA 19130			
			City	Stat	e ZIP Code	City	State ZIP Code	
		How long employed there	? 16 years					
P	Part 2: Give Details About	Monthly Income						
	Estimate monthly income as of spouse unless you are separated.		. If you have nothin	ng to	report for any line, w	rite \$0 in the space. Incl	lude your non-filing	
	If you or your non-filing spouse habelow. If you need more space, at			rmati	on for all employers f	or that person on the lin	es	
					For Debtor 1	For Debtor 2 or non-filing spouse		
2	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$ 5,214.00	\$	-	
3	Estimate and list monthly over	time pay.		3.	+\$	+ \$		
4	. Calculate gross income. Add lii	ne 2 + line 3.		4.	\$_5,214.00	\$		

Official Form 106l Schedule I: Your Income page 1

Debtor 1

Dorian L. Harris
First Name Middle Name Last Name

Case number (if known) 14 - 18499 ELF

		Fo	r Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$_	5,214.00	\$	
5. List all payroll deductions:					
5a. Tax, Medicare, and Social Security deductions	5a.	\$	990.00	\$	
5b. Mandatory contributions for retirement plans	5b.	\$		\$	
5c. Voluntary contributions for retirement plans	5c.	\$		\$	
5d. Required repayments of retirement fund loans	5d.	\$		\$	
5e. Insurance	5e.	\$	323.00	\$	
5f. Domestic support obligations	5f.	\$		\$	
5g. Union dues	5g.	\$		\$	
5h. Other deductions. Specify: retirement	5h.	+\$	162.00	+ \$	
		-		Ψ	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	h. 6.	\$_	1,475.00	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,739.00	\$	
8. List all other income regularly received:					
8a. Net income from rental property and from operating a business, profession, or farm					
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	2,120.00	\$	
8b. Interest and dividends	8b.	\$_		\$	
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	dent				
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_		\$	
8d. Unemployment compensation	8d.	\$_		\$	
8e. Social Security	8e.	\$_		\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		\$_		\$	
8g. Pension or retirement income	8g.	Ф		¢	
	· ·	Φ_	400.00	. Φ	
8h. Other monthly income. Specify: 6 Strings Music	_ 8h.	+ \$_	400.00	+\$	7
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	2,520.00	\$	<u> </u>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	6,259.00	+ \$	= \$6,259.00
11. State all other regular contributions to the expenses that you list in Scholnclude contributions from an unmarried partner, members of your household, friends or relatives.			lents, your roo	ommates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are	e not a	vailabl	e to pay expe	enses listed in Schedule J.	
Specify:				11.	+ \$
12. Add the amount in the last column of line 10 to the amount in line 11. Th	e resul	t is the	combined m	onthly income.	s 6,259.00
Write that amount on the Summary of Your Assets and Liabilities and Certain	Statist	ical Int	formation, if it	applies 12.	Ψ
					Combined monthly income
13. Do you expect an increase or decrease within the year after you file this No.	s form?	?			
☐ Yes. Explain:					

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- Ca		2001.1	Document	Page 3 of 5
Fill in this ir	nformation to identify yo	our case:		
Debtor 1 Debtor 2 (Spouse, if filing)		Middle Name	Harris Last Name Last Name	Check if this is: ✓ An amended filing ☐ A supplement showing postpetition chapter 13
Case number (If known)	Bankruptcy Court for the: Ea	stern district of t	Pennsyivania	expenses as of the following date: MM / DD / YYYY
Official F	Form 106J			
Sched	lule J: You	r Expe	nses	12/15
information. I				ing together, both are equally responsible for supplying correct n. On the top of any additional pages, write your name and case number

Part 1: **Describe Your Household** 1. Is this a joint case? No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? ☐ No Does dependent live Dependent's relationship to Dependent's Yes. Fill out this information for Do not list Debtor 1 and Debtor 1 or Debtor 2 with you? age Debtor 2. each dependent..... ☐ No 19 son Do not state the dependents' **✓** Yes names. ■ No <u>son</u> **☑** Yes ☐ No ☐ Yes ☐ No Yes ☐ No ☐ Yes 3. Do your expenses include **✓** No expenses of people other than ☐ Yes yourself and your dependents?

Part 2: **Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

		expenses paid for with non-cash government assistance if you know the value of sistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)	Your expenses	
4.		rental or home ownership expenses for your residence. Include first mortgage payments and rent for the ground or lot.	4.	\$1,653.00
	If no	ot included in line 4:		
	4a.	Real estate taxes	4a.	\$
	4b.	Property, homeowner's, or renter's insurance	4b.	\$
	4c.	Home maintenance, repair, and upkeep expenses	4c.	\$
	4d.	Homeowner's association or condominium dues	4d.	\$

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Debtor 1 Dorian L. Harris
First Name Middle Name Last Name

Case number (if known) 14 - 18499 ELF

		Your ex	penses
5. Additional mortgage payments for your residence, such as home equity loan	ns 5.	\$	
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	350.00
6b. Water, sewer, garbage collection	6b.	\$	90.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
6d. Other. Specify:		\$	
7. Food and housekeeping supplies	7.	\$	200.00
8. Childcare and children's education costs	8.	\$	
9. Clothing, laundry, and dry cleaning	9.	\$	100.00
Personal care products and services	10.	\$	
Medical and dental expenses	11.	\$	
Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	160.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	
4. Charitable contributions and religious donations	14.	\$	
Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20.		,	
15a. Life insurance	15a.	\$	51.00
15b. Health insurance	15b.	\$	
15c. Vehicle insurance	15c.	\$	90.00
15d. Other insurance. Specify:	15d.	\$	
5. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20 Specify: real estate	. 16.	\$	800.00
7. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	510.00
17b. Car payments for Vehicle 2	17b.	\$	
17c. Other. Specify:	17c.		
17d. Other. Specify:	17d.	\$	
 Your payments of alimony, maintenance, and support that you did not rep your pay on line 5, Schedule I, Your Income (Official Form 106I). 	ort as deducted from 18.	\$	
9. Other payments you make to support others who do not live with you. Specify: daughter	19.	\$	400.00
20. Other real property expenses not included in lines 4 or 5 of this form or or	Schedule I: Your Income	-	
20a. Mortgages on other property	20a.	\$	736.00
20b. Real estate taxes	20b.		
20c. Property, homeowner's, or renter's insurance	20c.		
20d. Maintenance, repair, and upkeep expenses	20d.		
20e. Homeowner's association or condominium dues	20e.		

Debtor 1	Dorian First Name	L. Middle Name	Harris Last Name	_	Case number (if known) 14	- 18499	ELF
21. Other . Sp	pecify:				21.	+\$	
22. Calculate	e your month	nly expenses.					
22a. Add	lines 4 through	gh 21.			22a.	\$	5,395.00
22b. Cop	y line 22 (mo	nthly expenses	for Debtor 2), if any, from Offic	ial Form 106J-2	22b.	\$	
22c. Add	line 22a and	22b. The result	is your monthly expenses.		22c.	\$	
23. Calculate	your month	y net income.					6 250 00
23а. Сор	y line 12 (<i>you</i>	ır combined mo	nthly income) from Schedule I.		23a.	\$	6,259.00
23b. Cop	y your month	ly expenses fro	m line 22c above.		23b.	-\$	5,395.00
23c. Sub	tract your mo	nthly expenses	from your monthly income.			· ·	864.00
The	result is you	monthly net in	come.		23c.	Φ	
24 Do vou ex	rnect an incr	ease or decre	ase in your expenses within	the year after you fi	ile this form?		
For examp	ple, do you ex	spect to finish p	aying for your car loan within the	ne year or do you ex	pect your		
☑ No.							
☐ Yes.	Explain he	re:					